



Preventing Homelessness: Discharge Planning from Corrections Facilities

August 2002

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United Way
of Central Ohio
Let's get to the *heart* of what matters.

Why Prevention?

“The homeless assistance system ends homelessness for thousands of people every day, but they are quickly replaced by others. People who become homeless are almost always clients of public systems of care and assistance. These include the mental health system, the public health system, the welfare system, and the veterans system, as well as the criminal justice and the child protective service systems (including foster care). The more effective the homeless assistance system is in caring for people, the less incentive these other systems have to deal with the most troubled people – and the more incentive they have to shift the cost of serving them to the homeless assistance system.” (National Alliance to End Homelessness [NAEH], 2000)

“Prevention holds hope as a sensible and cost effective way to stop the growth of homelessness. Given scarce public and private resources, the continual entry and re-entry of people into the homeless population makes it difficult to move beyond an emergency response to the problem. Were we to stop this flow, we could more effectively provide assistance to those who are currently homeless and begin to reduce the size of the homeless population. Only when this is done will the end of homelessness truly be in sight.” (NAEH, 1992)

HOMELESSNESS AND PRIOR INSTITUTIONALIZATION

- Almost 25% of the homeless population have been in a mental institution before they became homeless.
- 29% of homeless individuals were in some kind of treatment program before their current episode of homelessness.
- Over half of all homeless have previously been in local jails and about 20% have been in prison.
- Between 29% and 47% of homeless adult males have served in the armed forces prior to becoming homeless.
- Somewhere between 14% and 39% of the homeless population have been involved with foster care (compared with 2%-3% of the general population).

Lindblom, 1991

Why Discharge Planning?

The mental health systems, alcohol and drug treatment providers, and correctional facilities regularly release individuals back into society with little or no support upon exiting. The lack of support and/or proper planning increases the likelihood of individuals returning to jail, mental health facilities, or relapse into addictive behaviors.

U.S. Department of Justice, 2000

- Nearly 600,000 inmates arrive yearly at the doorsteps of communities nationwide (591,000 are state prisoners). By comparison, fewer than 170,000 were released in 1980.
- Inmates have always been released from prison, and officials have long struggled with helping them to success. But the current situation is different. The numbers of returning offenders dwarf anything known before, the needs of released inmates are greater, and corrections has retained few rehabilitation programs.
- Determinate sentencing means automatic release. Indeterminate sentencing lost credibility in part because it is discretionary use. But most corrections officials

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believe some power to individualize sentences is necessary, since it is a way to take into account changes in behavior or conditions that occur during incarceration.

- Increased dollars have funded operating costs for more prisons, but not more rehabilitation.
- The Office of National Drug Control Policy reported that 70-85 percent of State prisoners need treatment; however, just 13 percent receive it while incarcerated.
- Nearly 1 in 5 inmates in U.S. prisons report having a mental illness.
- Eighty percent of returning prisoners are released on parole and assigned to a parole office. The remaining 20 percent (about 100,000 in the 1998), including some who have committed the most serious offenses, will "max out" (serve their full sentence) and leave prison with no postcustody supervision.
- Fully two-thirds of all parolees are rearrested within 3 years. The numbers are so high that parole failures account for a growing proportion of all new prison admissions. In 1980, they constituted 17 percent of all admissions, but they now make up 35 percent.
- Recycling parolees in and out of families and communities has a number of adverse effects. It is detrimental to community cohesion, employment prospects and economic well being, participation in the democratic process, family stability and childhood development, and mental and physical health and can exacerbate such problems as homelessness.

NATIONAL CORRECTIONAL POPULATION REACHES NEW HIGH -- GROWS BY 126,400 DURING 2000 TO TOTAL 6.5 MILLION ADULTS

The nation's combined federal, state and local adult correctional population reached a new high of almost 6.5 million men and women in 2000, having grown by 126,400 men and women during the year, the Justice Department's Bureau of Justice Statistics announced in late August 2001. The total represented 3.1 percent of the country's total adult population, or 1 in every 32 adults.

The total adult correctional population includes incarcerated inmates as well as probationers and parolees living in the community. On December 31, 2000, there were 3,839,532 men and women on probation, 725,527 on parole, 1,312,354 in prison and 621,149 in local jails. The 2 percent increase last year was half the average annual increase of 4 percent since 1990.

During the past decade the total correctional population increased 49 percent. There were 2.1 million more men and women under correctional supervision in 2000 than in 1990.

AUGUST 8, 2001 - OHIO

- 45,833 incarcerated, a 2.2% reduction from 1999.

What is Discharge Planning?

Discharge planning is a process that occurs while the individual is still incarcerated, which prepares the individual for her or his re-entry into the community. Discharge planning is a formal function of corrections administrations in several states, and occurs informally in others via correctional health providers, community-based social services providers, or other prison-based social services staff. Discharge plans usually include an estimated discharge date, programs that the individual has completed in prison, and medical records, and attempt to line up a post-release residence, medical and mental health care providers, and other community-based services for the individual.

Housing is Major Barrier to Successful Reentry

- With no income immediately upon release, ex-offenders lack resources for rent and other housing costs, which limits housing options.
- Offenders convicted of drug offenses are barred from public and assisted housing.
- Screening for criminal history is common by landlords.
- Siting of halfway houses and supportive housing for ex-offenders is very contentious with prospective neighbors.

People with Mental Illnesses Often Lack Benefits Upon Release

- Growing numbers of men and women with severe mental illnesses are in jail or prison. Many cycle through corrections facilities repeatedly, costing criminal justice systems and communities significant resources and causing pain to the individual and their families.
- 284,000 men and women in jail have a severe mental illness such as schizophrenia or manic depression.
- Generally, the length of time a person is in jail determines whether, or when, federal SSI benefits will be affected.
- SSDI benefits are suspended following a conviction and confinement in jail for 30 days or longer.
- Medicaid and Medicare are suspended when someone is incarcerated. Medicare resumes when SSDI payments resume. Depending on length of incarceration, Medicare may be resumed upon release but may require redetermination of eligibility.
- Inmates not receiving benefits when sent to jail can apply for SSI or SSDI while incarcerated, in anticipation of their release. They usually need assistance, however, to obtain the appropriate forms and gather the necessary evidence.

SUPPORTIVE HOUSING DEVELOPERS FACE CHALLENGES TO DEVELOP HOUSING FOR EX-OFFENDERS:

Challenges unique to the criminal justice context may complicate involvement by supportive housing providers. These include challenges related to:

- 1) the unique service needs of ex-offenders;
- 2) working with the criminal justice system who tends to seem highly bureaucratic and whose case-management style differs from that of supportive housing providers;
- 3) involvement and coordination of new and diverse kinds of partners; and
- 4) new project models (more programmatic models than typical supportive housing).

A Guide to Re-Entry Housing
Corporation for Supportive Housing
2002

This country has made a decision to make a commitment, not in prevention, not in treatment, but in incarceration. There's a huge re-entry problem that policy-makers are just waking up to.

JoAnne Page, Executive Director
Fortune Society
SwissInfo News, August 21, 2002

What Can Be Done?

Innovative community programs

Improved public policy (federal, state, and local)

Sampling of Innovative Programs

Fortune Society, a New York non-profit organization staffed primarily by ex-offenders, provides housing and services to former prisoners. Operates the Castle, a 59-bed center on the western edge of Harlem.

Druid Heights Transitional Housing for Ex-Offenders, Baltimore, Maryland, started with a grant from the Enterprise Foundation. The project is part of an overall neighborhood revitalization strategy.

Safer Foundation, Chicago, provides education, employment and supportive services to ex-offenders and offenders. Manages secured residential centers.

Project Return, New Orleans, is a 90-day program that provides drug counseling, education, and job training. Incorporates non-traditional methods for grief counseling such as tribal rituals.

ELEMENTS OF SUCCESSFUL DISCHARGE PLANNING

1. The plan should prevent consumers from falling into homelessness.
2. Identification of appropriate housing is critical.
 - Discharges to emergency shelters are inappropriate for any situation.
 - Discharges to homeless programs who have 24-hour transitional program may be made on a case by case basis.
 - Discharges to supportive housing and/or halfway houses are beneficial.
3. Planning must be individualized, comprehensive, and coordinated with community based services.
4. Consumers must participate in the planning.
5. Institution staff (inclusive of professional staff) and community partners should be included.
6. For consumers who abuse substances, appropriate treatment must be included.

Essential Resources for Discharge Planning
National Health Care for the Homeless Council
2002

Sampling of Policy Initiatives

Federal Initiatives

The **Reentry Partnership Initiative**, sponsored by the U.S. Department of Justice's Office of Justice Programs and National Institute of Justice, provides new models for offenders returning to the community in eight sites: Baltimore, Maryland; Burlington, Vermont; Columbia, South Carolina; Kansas City, Missouri; Lake City, Florida; Las Vegas, Nevada; Lowell, Massachusetts; and Spokane, Washington.

The Serious and Violent Offender Reentry Initiative was developed by the U.S. Department of Justice Office of Justice Programs (OJP), in conjunction with other federal partners. The Reentry Initiative is a comprehensive effort that addresses both juvenile and adult populations of serious, high-risk offenders. It provides funding to develop, implement, enhance, and evaluate reentry strategies that will ensure the safety of the community and the reduction of serious, violent crime. This is accomplished by preparing targeted offenders to successfully return to their communities after having served a significant period of secure confinement in a state training school, juvenile or adult correctional facility, or other secure institution.

The Reentry Initiative represents a new way of doing business for federal, state, and local agencies. Instead of focusing the Initiative on a competition for a limited amount of discretionary funds, the federal partners are coming together to help state and local agencies navigate the complex field of existing state formula and block grants and to assist them in accessing, redeploying, and leveraging those resources to support all components of a comprehensive reentry program. The discretionary funding available through this Initiative will be provided only to fill any gaps in existing federal, state, and local resources.

Communities selected to participate in the Reentry Initiative will have the opportunity to develop state-of-the-art reentry strategies and to acquire knowledge that will contribute to the establishment of national models of best practices. The Reentry Initiative allows communities to identify the current gaps in their reentry strategy and present a developmental vision for reentry that seeks to fill those gaps and sustain the

THREE PHASES OF REENTRY

Phase 1—Protect and Prepare: Institution-Based Programs. These programs are designed to prepare offenders to reenter society. Services provided in this phase will include education, mental health and substance abuse treatment, job training, mentoring, and full diagnostic and risk assessment.

Phase 2—Control and Restore: Community-Based Transition Programs. These programs will work with offenders prior to and immediately following their release from correctional institutions. Services provided in this phase will include, as appropriate, education, monitoring, mentoring, life skills training, assessment, job skills development, and mental health and substance abuse treatment.

Phase 3—Sustain and Support: Community-Based Long-Term Support Programs. These programs will connect individuals who have left the supervision of the justice system with a network of social services agencies and community-based organizations to provide ongoing services and mentoring relationships.

Examples of potential program elements include institution-based readiness programs, institutional and community assessment centers, reentry courts, supervised or electronically monitored boarding houses, mentoring programs, and community corrections centers.

overall strategy. Additionally, communities can enhance existing reentry strategies with training and technical assistance that will build community capacity to effectively, safely, and efficiently reintegrate returning offenders.

The Serious and Violent Offender Reentry Initiative is supported by the U.S. Department of Justice, Office of Justice Programs and National Institute of Corrections, and their federal partners: the U.S. Departments of Education, Health and Human Services, Housing and Urban Development, and Labor.

Massachusetts

In January 2000, the Massachusetts Executive Office for Administration and Finance established the Working Group on Discharge Planning. The group was charged with examining the discharge planning policies and systems within correctional facilities and the Commonwealth's human service agencies and identifying initiatives to improve these systems.

*Among the many objectives to be achieved by discharge planning, **the goal of preventing releases into homelessness should appropriately be identified as one priority.** This should include a discussion of discharge planning as both a public safety issue, as it relates to the potential reduction of recidivism, and a cost containment opportunity. In evaluating the success of discharge planning conducted by both Commonwealth employees and contracted vendors, prevention of releases into homelessness should be included as a performance standard. This is not to argue that discharge planning in the context of correctional facilities can, or should, be understood as guaranteeing stable housing arrangements or supportive services for every released inmate. Consistent with their mission to promote public safety, however, these institutions can be expected to act on behalf of the general public in assisting inmates who are in their custody and are preparing to transition back into the general public*

Current Massachusetts Best Practices

- **Needs assessment** of inmates to be discharged are conducted.
- Through the **Triage Team system**, appropriate parties likely to possess vital information regarding post-release needs are brought together.
- The **five-day workshops** and the **reintegration program for substance abusers** associated with the Correctional Recovery Academy both involve the inmates extensively in the process of planning for their own post-release conditions.
- The Department of Correction's recently established collaborative efforts with both the Department of Public Health and Department of Mental Health provide **specialized discharge planning services for targeted populations.**
- The Department of Corrections, in collaboration with other agencies, appears to be in the process of expanding the **involvement of community-based service providers** within their facilities. By contracting for services with community-based providers who will continue interacting with the inmate in the post-release period, these efforts promise to offer some continuity of service to those passing through the transition

period. This type of continuity is an important characteristic of effective discharge planning.

- The **Transitional Intervention Plan** also promises to provide feedback to discharge planners regarding the success and appropriateness of their discharge planning, which is another important characteristic of effective discharge planning.

Planned Massachusetts Initiatives

1. The Department of Correction is in the early implementation stages of a **system-wide discharge planning process**. As part of this process, the Department will clearly articulate the role of discharge planning in its overall mission. The Department will also establish a method to monitor the operational success of the new process and its various components. Such an evaluation will be designed to identify both the potential benefits and the limits of discharge planning as a means of promoting successful reintegration and, by extension, furthering the goal of protecting public safety.
2. As the Department of Correction makes housing referrals, it will compile an **inventory list of transitional and supportive housing** programs being utilized by inmates released from its facilities. Without such an inventory, it is nearly impossible to evaluate the needs that exist or the reallocation of resources that might be possible and desirable.
3. As discharge planning becomes a more prominent aspect of the Department's work, **appropriate training for those staff** carrying out these responsibilities will be provided. The Department will develop a systematic training process by which staff members learn to locate and identify the community resources available to released inmates.
4. The Department will **catalogue its collaborative efforts** with other state agencies and departments and identify those that are regularly serving its released inmates. Such identification will serve as a first step in identifying potential areas of further collaboration to strengthen the safety net of services available to these vulnerable populations and thus reduce recidivism and higher long-run costs to the Commonwealth.
5. While utilizing community-based resources for services during the pre-discharge period poses a greater challenge for the Department's facilities than it does for the more geographically-specific, county correctional facilities, linkages will be actively pursued wherever possible. To date, the Department has experienced limited involvement of community-based resources providing services to inmates within its facilities. This type of **continuity of care** can provide important community links and help minimize the disruption of the transition period.
6. The Department will establish procedures to **gather information** on the appropriateness of its placement practices. As the Department increases its interaction with community-based service providers, it will have an ongoing system for monitoring its reliance on and utilization of those resources. Without

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compromising the privacy rights of ex-offenders, the Department will collect information from community-based providers about the general and ongoing suitability of its referrals and placements. The Transitional Intervention Plan will be closely monitored as a model in this regard. Although TIP is designed to serve a limited population (AIDS/HIV positive inmates), the lessons learned from its design and operation will be closely observed and shared with the Department's policy-makers.

7. The Department will adopt low-cost procedures to be followed for the one-third of its inmates who chose not to participate in discharge planning workshops. For example, the Department is preparing **resource packets** to provide certain inmates upon their release. There will always be non-participating or disengaged inmates who, nevertheless, have needs related to their reintegration. Contingency plans, such as the distribution of resource packets, are not in place at this time. While transition planning is ultimately the responsibility of the released inmate, the potential community costs of failed reintegration dictate that some minimal level of useful information should be provided to all inmates being released.
8. The Department will **identify those inmates most likely to be at high risk of homelessness beyond those suffering from substance abuse and mental illness**. The Working Group on Discharge Planning heard anecdotal evidence of the unique challenges facing some types of offenders in their attempt to secure housing in the post-incarceration period. The Department will attempt to quantify this problem and articulate the need for discharge planning and community reintegration programs appropriate to these types of special populations. Such an assessment should include a realistic evaluation of the potential and limits of pre-release discharge planning.
9. Over the past several months, the Department of Correction has undertaken "reentry initiatives" with two separate Commonwealth communities. The initiatives involve **working with local law enforcement and community representatives** to support an inmate's transition into the community. Specifically, the Department is working with the City of Lowell and Hampden County. These two programs will be closely monitored as pilots that can potentially be expanded statewide in the future.
10. The Department will formally seek definitive word from the Headquarters Office of the U.S. Department of Housing and Urban Development (HUD) on **inmate eligibility for McKinney-funded transitional housing resources**. Having done so, the Department will then ask the Executive Office of Public Safety (EOPS) to circulate this information to all those involved with discharge planning from correctional facilities in order to make sure there is universal understanding of the eligibility requirements. EOPS will then solicit the support of parties responsible for overseeing the funding and operation of such transitional resources to make them aware of the HUD regulations.

Illinois

Congressman Danny K. Davis, 7th District of Illinois, introduced new legislation entitled "Public Safety Ex-offender Self Sufficiency Act of 2002" (H.R. 3701) into the House of Representatives on February 7, 2002. It provides for *transitional housing* for ex-offenders, with on-site delivery of **employment placement** and **supportive services** to facilitate successful ex-offender re-entry and promote public safety.

H.R. 3701 amends the IRS code of 1986 to reflect an ex-offender low-income housing credit to encourage the provision of housing, job readiness training, and other essential services delivered in structured living environments designed to assist ex-offenders in becoming self-sufficient.

This comprehensive legislative initiative addresses the United States' lack of a systematic, comprehensive approach to re-integrating the increasing number of returning ex-offenders. It seeks to decrease recidivism rates and the cost of crime to victims, and increase public safety.

This legislation addresses needs and solutions identified by the 7th District of Illinois Ex-Offenders Task Force, a broad group of representatives from national and local civil rights organizations, community-based organizations, ex-offenders, academicians, law-enforcement officials, elected officials, community activists, faith-based organizations, block club residents, businesses and community residents who collaborated with the ex-offender population to find solutions.

The Task Force identified safe and affordable housing for ex-offenders as a key barrier and critical as a stabilizing force. But since the issues are far broader than housing alone, this legislative initiative addresses the re-integration of ex-offenders from a more holistic perspective.

Among the support services identified in the legislation are: job readiness training, employment counseling and placement, entrepreneurial training, financial management, substance abuse counseling, anger management, healthcare services, educational assistance and family and crisis management. The ex-offender resident must enter a written agreement to attend and participate in the supportive services program and may not default on this agreement.

For a copy of the bill and its status, go to [Thomas: Legislative Information on the Internet \(http://thomas.loc.gov\)](http://thomas.loc.gov) and type in H.R. 3701 or contact Congressman Davis' office at 773/533-7520.

Minnesota

Minnesota Department of Corrections has undertaken an effort to develop housing options for ex-offenders. The initial report (March 2001) recommended the following housing services:

- ✱ Guaranteed emergency bed access
- ✱ Transitional housing
- ✱ Supportive housing
- ✱ Access to market rate and affordable housing

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Additional recommendations focused on improved system coordination and communication, improved transitional services and earlier release planning, as well as, increased public education and awareness of needs.

Ohio

Ohio Department of Rehabilitation and Corrections

The Ohio Department of Rehabilitation and Corrections (ODRC) plans to develop and implement the Ohio Community-Oriented Reentry (CORE) Project, which will target adult offenders who are returning to Ohio's two largest urban areas, Cuyahoga and Franklin Counties, and the suburban/rural area of Allen County. Through the CORE Project, the Department will partner with various service agencies to address the challenges of recidivism, substance abuse, and physical and mental health issues and to support education, workforce participation, housing, family reunification, faith-based issues, and mentoring. (Amount of DOJ grant: \$1,998,014)

Local contact: Horst E. Gienapp, 614-752-1607.

OJP contact: Adam Spector, 202-307-0703.

ODRC has established a designated liaison to the Community Shelter Board and the Continuum of Care's 10-Year Plan to End Homelessness. She will be touring supportive housing developed under the Rebuilding Lives Plan on September 5, 2002.

Ohio Supreme Court

Ohio Supreme Court Justice Eve Stratton has a statewide task force to develop sentencing options and diversion programs. The Community Shelter Board has provided background is a resource to the court.

Franklin County

Judge Scott Vanderkaar, and Judge Jennifer Brunner have convened a task force to address issues of mental illness and the local criminal justice system. Sub-committees are working on the following: Crisis Intervention Team Training, Mental Health Courts, Jail Assessment and Referral and Public Awareness. Tom Albanese, Program Director at the Community Shelter Board, is a member of the Task Force

CSB staff met with Gayle Dittmer, Chief Probation Officer, Franklin County Adult Probation, on August 28, 2002.

Next Steps for CSB

Cultivate relationship with ODRC

- ⌘ Develop understanding of discharge practices
- ⌘ Request participation in CORE initiative
- ⌘ Explore feasibility of cooperation to facilitate development of supportive housing
- ⌘ Explore options to decrease discharge to shelter

Participate in ongoing planning groups

- ⌘ Franklin County Mental Health Court Task Force
- ⌘ Ohio Supreme Court

Cultivate relationship with Franklin County Probation and Sheriff's Office

- ⌘ Develop understanding of discharge and supervision practices

Develop understanding of local impact and resources

- ⌘ Explore feasibility of determining extent of ex-offenders receiving homeless services via HMIS data match with ODRC and/or sample survey of shelter residents.
- ⌘ Establish point of contact at all local human service organizations which work with ex-offenders

Develop state advocacy strategy

- ⌘ Meet with local faith-based organizations to understand advocacy and programming activities related to criminal justice
- ⌘ Meet with COHHIO to determine feasibility of joint advocacy efforts to develop coordinated discharge planning and adequate resources to assure re-entry without utilization of homeless services
- ⌘ Meet with Columbus Coalition for the Homeless members to determine feasibility of joint advocacy efforts to develop coordinated discharge planning and adequate resources to assure re-entry without utilization of homeless services

Provide support to CSB partners

- ⌘ Share information about all of the above
- ⌘ Determine needs of providers to better divert ex-offenders who are being released from corrections facilities

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